

REQUEST FOR VOTER RECORD INFORMATION CANDIDATE/COMMITTEE

MATERIAL SELECTION:

- | | | |
|---|---|---------------------------------|
| <input type="checkbox"/> Alphabetical Index | <input type="checkbox"/> Voted Voter History | <input type="checkbox"/> Labels |
| <input type="checkbox"/> Street Address Index | <input type="checkbox"/> Statement of the Vote | |
| <input type="checkbox"/> Voter File | <input type="checkbox"/> Vote by Mail Voters (VBM) | |
| <input type="checkbox"/> Voter File w/History | <input type="checkbox"/> Precinct/District File (PDF) | |

FORMAT SELECTION:

- | | | |
|--|---------------------------------|--|
| <input type="checkbox"/> Hard Copy Print Out | <input type="checkbox"/> Labels | <input type="checkbox"/> One Per Household |
| <input type="checkbox"/> CD | | <input type="checkbox"/> One Per Voter |
| <input type="checkbox"/> Diskette | | |

DATA SELECTION:

- | | |
|---|--|
| <input type="checkbox"/> Countywide | <input type="checkbox"/> Election _____ |
| <input type="checkbox"/> By District _____ | <input type="checkbox"/> Date Range _____ to _____ |
| <input type="checkbox"/> By Precinct (list below) | <input type="checkbox"/> Party Specific _____ |

Precincts Requested: _____

FEE SCHEDULE:

Hard Copy - Index Format	\$.50c per 1,000 names (additional fee for party) (EC 2184)
Hard Copy - Archive Materials	\$ 5.00 - set up fee + .50c per page
Statement of the Vote - C/D or Disc	\$ 15.00 - flat rate
Statement of the Vote - Hard Copy	\$ 20.00 - flat rate
Voter File w/History Included - CD	\$ 40.00 - Set up fee + \$1.00 per 1,000 records
Voter File w/o History - CD	\$ 40.00 - Set up fee + .30c per 1,000 records
Vote by Mail Voter List - CD/Disc	\$ 10.00 - flat rate
Vote by Mail Voter List - Hard Copy	\$ 10.00 + .10c per page
Precinct/District File (PDF)	\$ 10.00 - flat rate
Labels	\$ 40.00 - set up fee + \$10 per 1,000 labels
Maps - Individual Precincts	\$.50 - each precinct
Maps - Countywide/City/Supervisory	\$ 5.00 - flat rate

DECLARATION OF APPLICANT:

I, the undersigned, agree, that within five (5) calendar days of notification of completion of my request, payment will be made in full to the County Clerk - Elections Division.

_____	_____	_____
Date	Signature of Applicant	Telephone Number

FEE ITEMIZATION:

Total Number of Records: _____

Total Number of Pages: _____

Rate per Record/Page: _____

Total Fee Due: _____

☐ ORDER APPROVED _____

REQUEST FOR VOTER RECORD INFORMATION INDIVIDUAL

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- | | | |
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| <input type="checkbox"/> Voter File | <input type="checkbox"/> Vote by Mail Voters (VBM) | |
| <input type="checkbox"/> Voter File w/History | <input type="checkbox"/> Precinct/District File (PDF) | |

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